## **Nutrition and WIC Update**

**Enhancing Kansas Nutrition Services** 

## Nutritional Status of Persons Using A Local Emergency Food System Program In Middle America–Manhattan, Kansas

Karen Fitzgerald, Campaign to End Childhood Hunger

This study of participants of the Flint Hills Breadbasket in Manhattan, Kansas looked at the nutritional status of nontransient persons, that is, persons with a home base.

The most important finding of this research project was the high prevalence of persons who were either underweight or obese. Very few participants were at normal weight. This suggests that this segment of the population may be at higher risk for problems related to malnutrition than the general population. Additionally, obesity is a major risk factor for many chronic diseases, including heart disease, diabetes, and high blood pressure.

Among the women in the sample, many of those of childbearing age had anemia. This finding is particularly distressing, since anemia during pregnancy has been associated with increased incidence of spontaneous abortion, premature delivery, stillbirth, and low birth weight.

Participants reported that they consumed many high calorie, high fat foods, including chips, cakes, cookies, and other snack foods, and pop. These findings suggest the need to include nutrition education for participants of food pantries. Education could focus on maximizing nutritional value at nominal cost. These findings also suggest the need to educate those in the community who contribute to food pantries about more appropriate food donations. Emphasis should be placed on high fiber, low fat, iron-rich foods, including vegetables, fruits, and beans.

Bell M, Wilbur L, Smith C. Nutritional status of persons using a local emergency food system program in middle America. J Am Diet Assoc. 1998;98:1031-1033.

#### **WIC and Health Wave Collaboration**

Nada Schroeder, RD, LD, Saline County

In December 1998 and January 1999 the local SRS office and Health Wave sent representatives to Saline County WIC voucher pick up. Their purpose was to personally visit with WIC participants and RP's about eligibility and benefits provided to enrollees in Medicaid and Health Wave. We share the goal of increasing participation in these programs.

In addition to enrollment outreach, the representatives were able to answer questions for our clients. According to their medical cards, many children are not current on their KBH's and the parents do not understand how this impacts benefits.

We felt this was so successful that we expanded it to cover all the counties in our shared service area and plan to make it an annual event. Call your local SRS office and ask them if they and Health Wave would like to come to your voucher pick up. I think you'll be pleased with the result!

## Be A Winner - Avoid PDA's Ten Common Critical Errors

Patrice Thomsen, WIC Program Consultant

In preparation for the recent New Employee Training Clinic, we asked PDA staff who key Certification Forms (CF) to list 10 critical errors that they thought were common problems. Here is their list, not in any particular order. CF field numbers are listed in parentheses. Have these fields been problems for your agency? Looking at the list of common errors would be a good place to start to decrease critical errors in your agency.

- / Leaving off migrant code. (CF Field 24)
- / Leaving off immunizations. (34)

- / When changing a woman's category from a Breastfeeding to Delivered, forgetting to change the category code (13) from B to D.
- When changing a woman's category from a
  Breastfeeding to Delivered, forgetting to add the
  Date of Medical Data (43).
  Refer to the PDA Manual, Section 1, "Medical
  Data Only Breastfeeding to Delivered". If a
  woman stops breastfeeding before her infant's 6
  month birthday, she can be changed to Delivered
  as shown in the PDA Manual. You do not have
  to collect new medical data, but must write a new
  Date of Medical Data (43). This is a good
  example of why you should keep your PDA
  Manual handy and use it!
- / Priority (50) and Category (13) do not agree. Refer to PPM II-2-12, or the NRF Quick Reference Sheet.
- Leaving off the blood work (47, 48)
- / Leaving the income (23) blank on subsequent certifications.
- / Incorrect food packages (38), particularly on Breastfeeding and Delivered women.
- / Incorrect case numbers and family codes (1).
- / Incorrect risk factors (49) with category (13).
  Refer to PPM II-2-12, or the NRF Quick
  Reference Sheet.

#### Welcome to these new staff:

Harvey County: Sharon-Friesen-Penner, RD, WIC Coordinator

Neosho County: Susan Ellis, RN, Administrator

Sedgwick County: Heather Long, RD Shawnee County: Mynika Shafer, Clerk Southwest KS WIC: Norma Ortega, Clerk Southwest KS WIC: Sandra Rincones, Clerk

#### We bid farewell to:

Riley County: Rachael Cunnick, RD taking a new position at Children's Mercy Hospital Sedgwick County: Theola Cooper, RN retiring

#### Congratulations to:

McPherson County: Karen Ediger, RN. Karen recently became a Certified Breastfeeding Educator by attending training in Oklahoma City at Mercy Hospital.

Miami County: Karen Gallagher, RN. Karen had a baby boy on January 12. His name is Erick Reed and he weighed 7 pounds and 3 ounces.

Sedgwick County: Carolyn Stansbury, RD/LD appointed new WIC Coordinator.

### **Winners of Nutrition Drawing**

Mary Washburn, Breastfeeding and Nutrition Services Coordinator

The Kansas Nutrition Network received a grant from the Kansas Association of Community Action Programs. With the grant the Kansas Nutrition Network was able to purchase a limited number of copies of the American Dietetic Association's Complete Food & Nutrition Guide. This interactive guide stands out from other nutrition books because it emphasizes individual choice and the control that each of us has over our own food, nutrition and activity behaviors. It is a wonderful resource for healthy meal planning.

23 counties entered their names in the drawing. Congratulations to the following lucky winners:

Clay Cloud Cowley
Crawford Ellis Miami
Rooks Russell Washington

## **State Agency News**

We welcome Terry Patnode as the new Vendor Manager/Program Consultant. Terry's duties will include program assistance and consultation on the food delivery component of the WIC program to local agencies and vendors throughout the state to ensure compliance with policies and procedures governing the WIC Program.

Congratulations to Kim Baum who has been promoted from Office Assistant to Office Supervisor within the State Agency WIC Program. Kim has been working 10 years at the state office with WIC.

# **An Ounce of Prevention Keeps the Germs Away**

A new program has been developed by the CDC's National Center for Infectious Diseases (NCID), Reckitt & Colman, Inc, Lysol (R) Products Group, and the CDC Foundation. Entitled "An Ounce of Prevention Keeps the Germs Away", the program is designed to reintroduce some of the methods to prevent illness that have been forgotten or neglected. It educates consumers to get "back to the basics" and practice a few simple behaviors that will prevent disease transmission. Included in the messages are:

Wash hands often Clean and disinfect surfaces Handle and prepare food safely Use antibiotics appropriately Keep pets healthy Avoid contact with wild animals Get immunized.

Materials available include a 30 minute video in television news magazine format, pamphlets, and posters. Single copies of the pamphlet and poster may be ordered by calling 1-800-995-9765 (select option 4). To order multiple copies of the print materials, contact the NCID Office of Health Communication at <a href="mailto:ncid@cdc.gov">ncid@cdc.gov</a>. If you need an electronic copy for printing your own materials, please e-mail <a href="mailto:ncid@cdc.gov">ncid@cdc.gov</a> with your name, address and phone requesting a diskette with the files. The video may be purchased for \$30.00 from the Public

Health Foundation at 1-800-41-TRAIN (request item VT-009).

#### **Dental Health Resources**

Are you in the middle of your categorical action plan on dental health and early childhood caries and don't know where to turn for resources? Well, help is on the way. Check out the following:

Colgate has produced a multi-cultural oral health program for Head Start and Early Childhood Programs called <u>Bright Smiles</u>, <u>Bright Futures</u>. The program provides a big reading book for children, audio cassette of songs for children, wall posters, light switch stickers, a videotape, teacher's guide with reproducible masters, and parent take home sheets. It also includes some samples of toothpaste and toothbrushes for children. The teacher's guide provides a variety of ideas for presenting dental health to children and their families. To order your kit, contact Colgate at: Bright Smiles, Bright Futures, 1133 Broadway, New York, New York 10160-1573 or call at 1-800-334-7734.

Want another resource for teaching about Baby Bottle Tooth Decay? Consider ordering the Health Education Fact sheet "Prevent Baby Bottle Tooth Decay" from the KDHE library. This single sided fact sheet reviews how baby bottle tooth decay occurs and how to prevent this disease before it happens. To order, contact the Community Health Library Services at Kansas State University, 10D Umberger Hall, Manhattan, KS 66506 and request pamphlet KPHEIL # CG3118.

#### And The Results Are In

Patricia Dunavan, Nutrition Education Specialist

The results of the recent newsletter survey are in. Thanks to all who took time from your busy schedules to fill out the form. Your input is valuable to us. Thirty five surveys were returned by the deadline. Below is a summary of the results.

The overwhelming number of readers (34) indicated that they read all or most of the newsletter. Of the 13 who indicated they read only a portion of the newsletter, the most popular segments were Nutrition education articles

- (12), Breastfeeding promotion (12), Abstracts of interest
- (11), the Lead article (10), and Questions and answers
- (10). One reader indicated that most staff tended to read those articles most pertinent to their job tasks.

The number of people at each address reading the newsletter varied greatly. The most common number sharing the newsletter was 3 but responses ranged from one to over12,000 (Parents as Teachers indicated that they send the newsletter to 260 parent educators who share it with over 12,000 parents). Indeed we are getting our messages out across the State.

Currently, our newsletter is published quarterly. Seventeen of the 35 respondents indicated that this was appropriate. Another 18 indicated that they wished to see the newsletter published more frequently (10 for once a month, 8 for six times a year). We will continue to look at this issue and see what will best meet the needs of our readers.

When asked to rate the newsletter for content, usefulness of information, and presentation, most respondents gave our newsletter high ratings of one or two (32 responses for content, 32 for usefulness of information, and 30 for presentation). When asked what should be deleted from the newsletter, comments were very positive. Some respondents suggested decreasing the number of articles that are too technical or contain research statistics that may not pertain directly to WIC. Others felt that the newsletter provided excellent information and had no further suggestions.

Many good suggestions were given for additions to the newsletter. More resources for interactive nutrition education, refreshers on policies and procedures, suggestions for clerical staff, examples of problems solved by other WIC agencies, information on childhood nutrition, and sharing of ideas from the nutrition services plan were only a few of the excellent ideas shared. We will try to include more of these types of articles in future issues.

We appreciate all your comments. Several respondents indicated that the newsletter was meeting their needs for information, focus and variety. One such comment is shared here: "I almost always can get good ideas from

this. This month's breastfeeding article was very good with lots of food for thought. I just wish we had the time to try more of the good ideas. Thanks." We hope to use the survey to improve the newsletter and better meet the needs of our readers. Thank you for your continued support.

## **Strategies for Teaching Creatively**

Pat Dunavan, Nutrition Education Specialist

How can we get adults to learn and put into practice what they have learned? Creativity is the key. Adults want to learn practical and easy-to-remember information, but they need that information presented creatively.

Below are five key creative teaching strategies that will help you design and present nutrition education classes or interactive learning centers.

1. Grab the learner's attention with an icebreaker. Icebreakers are used to reduce tension and get people to talk to each other while sharing something about themselves.

#### 2. Present a practical message.

No matter the technique you choose, make sure your message meets the needs of your audience. Lectures, demonstrations, videos, humor, props, and visuals can all be used to involve the learner in activities and get your message across.

3. Involve learners in activities that reinforce the message.

After presenting your main theme, use hands-on activities to reinforce the message and help the learner apply the information to their own lives. Facilitated discussion, small-group problem solving, games, and hands-on practice of new techniques all work well to enhance learning.

#### 4. Provide take home strategies.

Send your participants home with an activity or learning aid such as handouts, activity sheets, ingredients to make a new recipe, or "assignment" to complete at home, etc. that will help them start the new behavior at home. Ask clients questions on how they will use the new information after they go home.

5. *Follow up with participants* to review the topic and take home materials, answer questions, and announce any related educational opportunities or events.

But how do these strategies look in a lesson plan? Below is a brief outline of how these strategies could be used in a lesson on the food guide pyramid.

#### Icebreaker:

If you were a food, what would you be? Or What is your family's favorite meal?

#### Present the message:

Review the pyramid, and explain pyramid meal planning with examples using colored food model pictures.

#### Learner involvement:

Take sample meals and have the class place them in a pyramid meal plan. Ask each participant to describe a routine family meal, and use the food guide pyramid to understand its nutritional value, and revise it for optimum nutrition. Demonstrate cooking a "pyramid-based" one dish recipe.

#### Take home learning:

Ask participants to share the lesson's message with a friend or family member, or have them assess three meals in the next three days. Hand out pyramid magnets or a handout of the food guide pyramid.

Try these strategies in your own lesson plans. You may find that your participants are more interested in attending your classes or learning centers and come away with more nutrition information than before.

#### **WIC and Dental Health**

Pat Dunavan, Nutrition Education Specialist

WIC has always recognized the importance of healthy children. This includes dental health. The future oral health of WIC children depends primarily on parents. It is important to establish good dental health habits early in life. These habits are started and reinforced by parents' habits of brushing with a fluoridated toothpaste, eating healthy, and seeing the dentist regularly.

A positive attitude toward dental care is the foundation for a lifetime's interest in good oral health. To foster this positive attitude, parents, teachers, WIC, and dental providers must all work together. WIC staff routinely stress the importance of early dental visits to parents and encourage them to teach their children good dental habits. But what else can you do?

- / Provide a chart for parents that can be filled out each time a child brushes his or her teeth.
- Talk to parents about the importance of their children brushing their teeth at home and the importance of providing nutritious snacks and meals for their children. Give parents recipes for healthy snacks and ideas to try at home.
- / Help families get into dental care through referrals to local dentists.
- Provide classroom education on dental health. Encourage role playing about trips to a dental clinic. Display pictures of a dental clinic or provide videotapes of things that will happen at a dental visit.
- / Invite a dental health provider to come and talk to WIC parents and children about dental health.
- / Be a good role model by brushing and taking care of your own teeth.

What can parents do to promote good dental health?

/ Healthy smiles begin at home. Parents can brush their teeth with their children using a fluoridated

toothpaste every day, especially after meals and before bedtime. Consider using a timer to encourage children to brush longer. Three minutes is the suggested time for preschoolers to brush.

- / Limit sugar intake. Many children drink three or four cans of soda pop each day. When children are thirsty, give them water to drink. Encourage children to eat nutritious foods and avoid snacking on sugary foods. If sugary foods are given, the best time to do so is immediately after a meal.
- Take children to the dentist at least once a year. If they do not have a dentist, WIC staff can provide a referral.
- / Ask the dentist about dental sealants. A dental sealant is a plastic coating that is applied to the chewing surfaces of back teeth to protect them from bacteria. If they are applied as soon as the back teeth come in, sealants can prevent most decay.
- / Find out if the community has fluoride in the water system. If the community water system is not fluoridated, ask the dentist or doctor about giving children daily fluoride drops or tablets.

Improving the oral health of WIC children is a team effort. We can all help. Remember: there is magic in a healthy smile.

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